

AO 435 (Rev. 10/23)		ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS			FOR COURT USE ONLY	
TRANSCRIPT ORDER						DUE DATE:
<i>Please Read Instructions:</i>						
1. NAME Shannon Thomas		2. PHONE NUMBER (214) 580-2585		3. DATE 11/6/2024		
4. DELIVERY ADDRESS OR EMAIL sthomas@romclaw.com; emoon@romclaw.com		5. CITY Dallas		6. STATE Texas	7. ZIP CODE 75202	
8. CASE NUMBER 24-50224		9. JUDGE Parker		DATES OF PROCEEDINGS 10. FROM 11/5/2024 11. TO 11/5/2024		
12. CASE NAME Genesis Networks Telecom Services LLC				LOCATION OF PROCEEDINGS 13. CITY San Antonio 14. STATE Texas		
15. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CRIMINAL <input type="checkbox"/> CIVIL		<input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> IN FORMA PAUPERIS		<input checked="" type="checkbox"/> BANKRUPTCY <input type="checkbox"/> OTHER
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)						
PORTIONS		DATE(S)		PORTION(S)		DATE(S)
<input type="checkbox"/> VOIR DIRE				<input checked="" type="checkbox"/> TESTIMONY (Specify Witness)		11/5/2024
<input checked="" type="checkbox"/> OPENING STATEMENT (Plaintiff)		11/5/2024		All witnesses		
<input checked="" type="checkbox"/> OPENING STATEMENT (Defendant)		11/5/2024				
<input checked="" type="checkbox"/> CLOSING ARGUMENT (Plaintiff)		11/5/2024		<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specify)		
<input checked="" type="checkbox"/> CLOSING ARGUMENT (Defendant)		11/5/2024				
<input checked="" type="checkbox"/> OPINION OF COURT		11/5/2024				
<input type="checkbox"/> JURY INSTRUCTIONS				<input type="checkbox"/> OTHER (Specify)		
<input type="checkbox"/> SENTENCING						
<input type="checkbox"/> BAIL HEARING						
17. ORDER						
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE		COSTS
30-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			
14-Day	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			FILED
7-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			NOV 07 2024
3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			U.S. BANKRUPTCY COURT
Next-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			BY <i>V1</i> DEPUTY
2-Hour	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>				
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	0.00	
18. SIGNATURE <i>/s/ Shannon S. Thomas</i>				PROCESSED BY <i>Krystal Torres</i>		
19. DATE 11/6/2024				PHONE NUMBER <i>210-472-16720</i>		
TRANSCRIPT TO BE PREPARED BY <i>Exceptional Reporting</i>				COURT ADDRESS <i>615 Houston St. 594 San Antonio TX, 78205</i>		
ORDER RECEIVED	DATE	BY				
DEPOSIT PAID			DEPOSIT PAID			
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00		
TRANSCRIPT RECEIVED			LESS DEPOSIT	0.00		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00		